

RISK MANAGEMENT CLAIMS ADJUSTER

Purpose:

To actively support and uphold the City's stated mission and values. To perform complex work involved in the administration and implementation of the City's liability, property and automobile claims program within a self-insured public entity organization.

Supervision Received and Exercised:

The duties are performed with considerable independence and receive direction from the Risk Manager or from other supervisory or management staff.

Examples of Duties:

This class specification is intended to indicate the basic nature of positions allocated to the class and examples of typical duties that may be assigned. It does not imply that all positions within the class perform all of the duties listed, nor does it necessarily list all possible duties that may be assigned.

Duties may include, but are not limited to, the following:

- Conduct and manage all investigations of accidents, incidents, or other
 occurrences involving City property, vehicles or personnel resulting in personal
 injury or property damage; interview principals and witnesses to obtain the facts
 of the incident; assemble all necessary evidence, including interviews, reports,
 site investigations, photographs and all drawings prior to making a decision on
 the claim
- Process liability and subrogation claims with a knowledge of utilizing an electronic claim administration system for the purpose of entering claims into the system; documenting the electronic file with claim activity and processing of payments to vendors and claimants
- Communicate effectively and professionally, both in writing and verbally with City staff, claimants, insurance carriers, attorneys and the general public
- Negotiate and prepare claims settlements and determine City liability based on evaluation of injuries, medical reports, bills, estimates, and related facts; deny claims when investigation proves warranted

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- Assist in litigation management by preparing files with required forms, exhibits and reports; participate in negotiation settlements with claimants and attorneys; represent the City of Tempe in hearings and trials and other related meetings
- Assist the Risk Manager with the annual insurance renewal process providing the necessary loss runs and claim information requirement by the City broker; help compile the City asset information for the renewal application process
- Knowledge of and ability to interpret rules, regulations, and procedures to management and other employees in regards to municipal liability and the claim process
- Demonstrate continuous effort to improve operations, decrease claim turnaround time, streamline work processes and work cooperatively and jointly to provide quality customer service
- Compile monthly/quarterly/annual reports of claim expenses and claims status for City management and departments
- Identify, direct and coordinate repairs and corrections of potential liability hazards to the City
- Handle multiple projects simultaneously and use good judgment in prioritizing work assignments
- Visit and move about job or accident sites; move objects of approximately 30 lbs or less; ascend/descend elevations of various inclines; safely position self under and around objects and within minimal spaces to examine damage; and traverse uneven terrain
- Perform job duties when exposed to dust, grease, noise, inclement weather, temperature extremes, unpleasant odors and be able to identify and avoid exposure to environmentally hazardous materials
- Operate a variety of standard office equipment including a computer terminal, telephone, 10-key calculator, copy and fax machine requiring continuous and repetitive arm, hand and eye movement
- Respond to emergency call-out situations and/or provide service during normal office hours, nights and/or weekends
- Perform related duties as assigned.

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Experience and Training Guidelines:

Any combination of experience and training that would likely provide the required knowledge and abilities is qualifying. The hiring department may include job related experience, training or license and certification preferences at the time of

recruitment. A typical way to obtain the knowledge and abilities would be:

Experience:

Five years of full-time experience in claims investigation and adjusting. Municipal

claims adjusting experience is preferable.

Training:

Equivalent to a Bachelor's degree from an accredited college or university with major course work in insurance, accounting, finance, business or a related field.

Must possess a strong understanding of the principles of the insurance industry to

include property, casualty, general liability and self-insurance programs.

Licenses/Certifications:

Requires the possession of a valid driver's license.

This position is included in the City's classified service, pursuant to City of Tempe

Personnel Rules and Regulations, Rule 1, Section 103.

Job Code: 282

FLSA: Exempt